

My name is Dr. Matthew Paterna. I have been working with children who have been damaged by vaccines since 2004. I am writing in opposition to HB7199.

FRAUD HAS BEEN COMMITTED!

Let's use MATH and FACTS to illustrate my concerns.

As we speak there is a case against Merck, the manufacturers of GARDASIL for FRAUD! The case being heard is Jennifer Robi vs. Merck and Kaiser Permanente case in Los Angeles Superior Court. Here is what is being discussed:

(taken from the Gardasil package insert pg 7.)*

impairment).

Deaths in the Entire Study Population

Across the clinical studies, 40 deaths (GARDASIL N = 21 or 0.1%; placebo N = 19 or 0.1%) were reported in 29,323 (GARDASIL N = 15,706; AAHS control N = 13,023, saline placebo N = 594) individuals (9- through 45-year-old girls and women; and 9- through 26-year-old boys and men). The events reported were consistent with events expected in healthy adolescent and adult populations. The most common cause of death was motor vehicle accident (5 individuals who received GARDASIL and 4 individuals who received AAHS control), followed by drug overdose/suicide (2 individuals who received GARDASIL and 6 individuals who received AAHS control), gunshot wound (1 individual who received GARDASIL and 3 individuals who received AAHS control), and pulmonary embolus/deep vein thrombosis (1 individual who

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In reading this you see Gardasil =21 and Placebo =19. Their conclusion, NO statistical difference between the Control and the Placebo.

So where is the FRAUD?

In a typical drug/vaccine trial or any Double Blind Placebo study, the industry standard, there is a Control Group (the HPV Vaccine) and a

Placebo Group (Saline). Merck added a THIRD group called the AAHS (Amorphous Aluminum Hydroxyphosphate Sulfate). AAHS happens to be the adjuvant Merck uses in the Gardasil shot.

Here on Table 3 you see AAHS listed in the Control Group (where it belongs, as it is the adjuvant in Gardasil).

Table 3: Postdose Evaluation of Injection-Site Adverse Reactions in Girls and Women 9 Through 26 Years of Age (1 to 5 Days Postvaccination)

Adverse Reaction	GARDASIL (% occurrence)			AAHS Control* (% occurrence)			Saline Placebo (% occurrence)		
	Post-dose 1 N [†] = 5011	Post-dose 2 N = 4924	Post-dose 3 N = 4818	Post-dose 1 N = 3410	Post-dose 2 N = 3351	Post-dose 3 N = 3295	Post-dose 1 N = 315	Post-dose 2 N = 301	Post-dose 3 N = 300
Pain	63.4	60.7	62.7	57.0	47.8	49.6	33.7	20.3	27.3
Mild/Moderate	62.5	59.7	61.2	56.6	47.3	48.9	33.3	20.3	27.0
Severe	0.9	1.0	1.5	0.4	0.5	0.6	0.3	0.0	0.3
Swelling[‡]	10.2	12.8	15.1	8.2	7.5	7.6	4.4	3.0	3.3
Mild/Moderate	9.6	11.9	14.2	8.1	7.2	7.3	4.4	3.0	3.3
Severe	0.6	0.8	0.9	0.2	0.2	0.2	0.0	0.0	0.0
Erythema[‡]	9.2	12.1	14.7	9.8	8.4	8.9	7.3	5.3	5.7
Mild/Moderate	9.0	11.7	14.3	9.5	8.4	8.8	7.3	5.3	5.7
Severe	0.2	0.3	0.4	0.3	0.1	0.1	0.0	0.0	0.0

*AAHS Control = Amorphous Aluminum Hydroxyphosphate Sulfate

[†]N = Number of individuals with follow-up

[‡]Intensity of swelling and erythema was measured by size (inches): Mild = 0 to ≤1; Moderate = >1 to ≤2; Severe = >2.

Here on Table 5 you see AAHS listed in the Placebo Group. Throughout the remainder of this study, AAHS is listed in the Placebo Group!

Table 5: Common Systemic Adverse Reactions in Girls and Women 9 Through 26 Years of Age (GARDASIL ≥Control)*

Adverse Reactions (1 to 15 Days Postvaccination)	GARDASIL (N = 5088) %	AAHS Control [†] or Saline Placebo (N = 3790) %
Pyrexia	13.0	11.2
Nausea	6.7	6.5
Dizziness	4.0	3.7
Diarrhea	3.6	3.5
Vomiting	2.4	1.9
Cough	2.0	1.5
Toothache	1.5	1.4
Upper respiratory tract infection	1.5	1.5
Malaise	1.4	1.2
Arthralgia	1.2	0.9
Insomnia	1.2	0.9
Nasal congestion	1.1	0.9

*The adverse reactions in this table are those that were observed among recipients of GARDASIL at a frequency of at least 1.0% and greater than or equal to those observed among AAHS control or saline placebo recipients.

[†]AAHS Control = Amorphous Aluminum Hydroxyphosphate Sulfate

Therefore, ***their*** conclusion of the study is the Placebo (AAHS + Saline=19 deaths) is equally dangerous as the Control (Gardasil =21 deaths). **FRAUD ALERT!!!!**

AAHS is NOT a PLACEBO. It is an equally dangerous component of the Gardasil shot! So instead of comparing an apple to an orange, they cut the apple in half and added it to the group with the orange and called that the PLACEBO.

Side note: Aluminum is a key ingredient in many vaccines. If you're looking for a safety study on aluminum adjuvants, this is one right here! Alone, it killed 19 out of 29,323.

Here is some simple MATH:

Chance of being diagnosed with Cervical Cancer in The United States 2 in 100,000. (According to the NIH).

Chance of dying from the HPV shot 40 in 29,323. (According to the package insert)

40: 29,323

X : 100,000

X = 136

Conclusion: If this HPV study were done on 100,000 people, 136 would die! According to this study, the recipient had a 68X greater chance of dying receiving the HPV shot than dying from cervical cancer. Average age of death is under age 26 for the HPV shot and age 57 for the Cervical Cancer.

(The study makes no mention of paralysis or permanent neurological damage, which thousands of cases have been reported following the HPV Vaccine.)

This is deceptive a practice that was intentionally done to fast track a drug that supposedly prevents cancer!

13 NONCLINICAL TOXICOLOGY

13.1 Carcinogenesis, Mutagenesis, Impairment of Fertility

GARDASIL has not been evaluated for the potential to cause carcinogenicity or genotoxicity.

What? A drug that is supposed to prevent cancer hasn't been tested for potential carcinogenicity or genotoxicity? Sigh.....

Today, Merck will claim that their new Gardasil shot is much safer. I would have serious apprehension regarding any research or statements Merck claims based on their sordid and questionable history.

There is far too much doubt and danger surrounding this vaccine. HB 7199 MUST DIE in committee or more children in our state will die from this DANGEROUS and unnecessary vaccine!

[*https://www.fda.gov/downloads/biologicsbloodvaccines/vaccines/approvedproducts/ucm111263.pdf](https://www.fda.gov/downloads/biologicsbloodvaccines/vaccines/approvedproducts/ucm111263.pdf)

PS: Meningitis is not easily transmitted in a middle school or high school setting as it requires intimate contact. There is no need to further tax a developing teen with more unnecessary toxins to prevent an extremely rare bacterial disease. Furthermore, there are very few cases EVER reported in children or teens under 18.

Respectfully Submitted,

Dr. Matthew Paterna

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